UTILITY PATENT APPLICATION

First Inventor Wei-pin LI et al.

Attorney Docket No.

TRAN	SMITTAL		Title	CONTROLLED DELIVERY OF THERAPEUTIC AGENTS BY INSERTABLE MEDICAL DEVICES					
(Only for new nonprovisional a	applications under 37 C	FR 1.53(b))	Expres	s Mail Label No			4 0		
See MPEP chapter 600 concern		tion contents	А	DDRESS TO	O; Box Paten	Commissioner for Patents t Application on, DC 20231	jas		
2. Applicant claims s See 37 CFR 1.27. 3. Specification (preferred arrangeme - Descriptive title of ti - Cross References ti - Statement Regardir - Reference to seque or a computer progr - Background of the I - Brief Summary of the	[Total Pagent set forth below] ne Invention o Related Applications ng Fed sponsored R & D nnce listing, a table, ram listing appendix nivention ne Invention the Drawings (if filed)	ages 30]	9 10	Computer . Nucleotide and (If applicable, a a. Computer b. Specification CD-ROM paper c. Statemen ACCOM Assignm 37 C.F.R. (when the	Program (Appendor Amino Acid : In recessary) r Readable Form Sequence Listing or CD-R (2 counts verifying iden IPANYING APPLIENT Papers (counts 3 73(b) Statemere is an assign	Sequence Submission n (CRF) ng on pies); or tity of above copies LICATIONS PARTS ver sheet & document(s)) ment Power of			
b. Copy from a prio (for a continuation DELETION OF Signed Statement: named in the prior 1 63(d)(2) and 1 3: 6. Application Data She 18. If a CONTINUING APPLICA	[Total Pal (original or copy) r application (37 CFF on/divisional with Box F INVENTOR(S) attached deleting invent application, see 37 CFI 3(b) et. See 37 CFR 1 76	ges (d)) 1.63 (d)) 18 completed) or(s)	12 13 14 15 16	12. ☐ Information Disclosure ☐ Copies of IDS Statement (IDS)/PTO-1449 Citations 13. ☐ Preliminary Amendment 14. ☐ Return Receipt Postcard (MPEP 503) (Should be specifically itemized) 15. ☐ Certified Copy of Priority Document(s) (if foreign pnority is claimed) 16. ☐ Request and Certification under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. 17. ☐ Other.					
or in an Application Data Shee Continuation Prior application information For CONTINUATION or DIVISIO under Box 5b, is considered a The incorporation can only be	Divisional Examiner DNAL APPS only: The expart of the disclosure relied upon when a po	of the accompar rtion has been i	of the paying or nadverte	Gro prior application, divisional applica ently omitted from	ation and ia baval	ath or declaration is suppli	ed ce.		
	1	7. CORRESPO							
☑ Customer Number or Bar C	ode Label(Insert (Customer No. or		code label here)	or 🔲 Co	orrespondence address belo	w		
Name KENYON & KEN		238	38						
Address 1500 K Street N	.W., Suite 700	TAGENT THOSE		OL	741				
City Washington		State	D.C		Zin Codo	20005-1257			
Country UNITED STATE	S Te	lephone	-	220-4200	Zip Code Fax	202-220-4201			
Name (Print/Type) J	ennifer L. King		Regis	tration No. (Attor		46,828			
Signature	lon malo		n5		Date	January 2, 2001			

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2844/55202

F	EE	TR	AN	SMI	TT	AL
		for	FY	200	1	

Patent fees are subject to annual revision.

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TOTAL AMOUNT OF PAYMENT

Complete if Known							
Application Number	To Be Asisgned						
Filing Date	Herewith						
First Named Inventor	Wei-pin LI et al.						
Examiner Name	To Be Assigned						
Group / Art Unit	To Be Assigned						
Attorney Docket No.	2844/55202						

		METHOD	OF F	PAYMENT (chec	k one)					FEE C	ALCULATION (continued)	
The Commissioner is hereby authorized to charge indicated fees and credit any over payments to					3. ADI	DITIONAL	FEES					
1. —		indicate	:d fee:	s and credit any o	over payments t	to	1	Large		Small		
							Fee	Entity Fee	Fee	Entity Fee		F
Depo Acco		11-0600	n				Code	(\$)	Code	(\$)	Fee Description	Fee Paid
Numi		11 0000	•				105	130	205	65	Surcharge - late filing fee or oath	
Depo	sit						127	50	227	25	Surcharge - late provisional filing fee or cover sheet	
Acco		KENYO	N & K	KENYON			139	130	139	130	Non-English specification	
Name	3						147	2.520	147	2,520	For filing a request for reexamination	
⊠c	harge An	y Additiona	ıl Fee	Required			112	920*	112	920*	Requesting publication of SIR prior to	
		CFR 1 16 a claims sma									Examiner action	
	See 37 CI						113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action	
	1 dyllici	it Endlose	u				115	110	215	55	Extension for reply within first month	
	Check	☐ Credi	t card	Money Order	☐ Other	ſ	116	390	216	195	Extension for reply within second month	
		F	EE C	ALCULATION			117	890	217	445	Extension for reply within third month	
1. B	ASIC FIL	ING FEE					118	1,390	218	695	Extension for reply within fourth month	
Large	Entity S	Small Er	ntity				128	1,890	228	945	Extension for reply within fifth month	
Fee			ee	Fee Description	1		119	310	219	155	Notice of Appeal	
Code	• • •	Code (\$)		Fee	e Paid	120	310	220	155	Filing a brief in support of an appeal	
101		201 35		Utility filing fee	710	0	121	270	221	135	Request for oral hearing	
106 107		206 16 207 24		Design filing fee Plant filing fee			138	1, 510	138	1,510	Petition to institute a public use proceeding	
108	710 2	208 35	55	Reissue filing fee	e -		140	110	240	55	Petition to revive – unavoidable	
114	150 2	214 75	5	Provisional filling			141	1.240	241	620	Petition to revive – unintentional	
						142	1,240	242	620			
		SUB	TOTA	L (1)	(\$)	710	143	440	243	220	Utility issue fee (or reissue) Design issue fee	
2. EXTR	A CL AIR	4.5550					144	600	244	300	Plant issue fee	
Z. EXIK	A CLAIN	I FEES		Extra F	ee from	F	122	130	122	130		
					elow	Fee Paid	1	150	122	130	Petitions to the Commissioner	
Total Claim Independent		-20**	=		18 =	468	123	130	123	130	Petitions related to provisional applications	
Claims	5	-3**	=	2 X	80 =	160	126	180	126	180	Submission of Information Disclosure Stmt	
Multiple Dependent				Х	=	0	581	40	581	40	Recording each patent assignment per property (times number of properties)	
Large Fee	Fee	Small Fee	Entit Fee	Y Fee Descript	ion		146	710	246	355	Filing a submission after final rejection (37 CFR § 1.129(a))	
Code 103	(\$) 18	Code 203	(\$) 9	Claims in exc			149	710	249	355	For each additional invention to be	
102	80	202	40		claims in excess	s of 3	l				examined (37 CFR § 1.129(b))	
104	270	204	135				179	710	279	355 F	Request for Continued Examination (RCE)	
109	80	209	40		Multiple dependent claim, if not paid ** Reissue independent claims over			900	169	900	Request for expedited examination of a design application	
110	18	210	9		ams in excess o	of 20 and						
			c				Other fe	e (specify	<i>(</i>)			
			31	UBTOTAL (2)	(\$) 628		1				L	
							*Reduc	ed by Bas	sic Filing	Fee Pa	id SUBTOTAL (3) (\$) 0	
**or numb	er previou	sly paid, if g	reater	, For Reissues, se	e above						(4)	

SUBMITTED BY			Co	emplete (if applicable)	
Name (Print/Type)	Jennifer L. King	Registration No Attorney/Agent) 46,828	Telephone	202-220-4363	,
Signature	1 Jenne	ROXXIA	Date	January 2, 2000	

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